PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450

Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

						•				
INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notificat	a below of affected off	for trange the nerwise	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and PUBLIC rders and notification a) specifying a new co	of n	ON FEE (if requipment of the control	ired). E vill be ; and/or	Blocks I through 5 s mailed to the current (b) indicating a sep	should be completed when t correspondence address a parate "FEE ADDRESS" fo	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
22428	7590 01/27	/2009						J		
FOLEY AND LARDNER LLP SUITE 500 3000 K STREET NW WASHINGTON, DC 20007						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
						(Depositor's name)				
						(Signature)				
						(Date)				
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN			TOR /		RNEY DOCKET NO.	CONFIRMATION NO.	
10/550,603	07/24/2006	Josephus M. M. Van C	aste	1		082671-0230	4269			
TITLE OF INVENTION:	ero de la construcción de la con		* · · · · · · · · · · · · · · · · · · ·	V		T ONE SUBSTRA	TE AS	WELL AS SUCH A	SYSTEM	
APPLN. TYPE	SMALL ENTITY	SMALL ENTITY IS:		PUBLICATION FEE DUE		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	NO		\$300		\$0		\$1810	04/27/2009	
EXAMINER			ART UNIT	CLASS-SUBCLASS						
PHAM, HOA Q 2886				356-614000						
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AN				••	٠.	,				
PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG		fied be letion o	low, no assignee of this form is NO	data will appear on th T a substitute for filing (B) RESIDENCE: (C		_			ocument has been filed for	
ASSEMBLEON	THE NETHERLANDS									
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government										
				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-0741 (enclose an extra copy of this form).						
5. Change in Entity State	us (from status indicated SMALL ENTITY statu		•	☐ b. Applicant is no						
NOTE: The Issue Fee and nterest as shown by the re	Publication Fee (if requeeords of the United State	ired) w	rill not be accepted nt and Trademark	I from anyone other the Office.	n th	e applicant; a regis	tered at	ttorney or agent; or th	e assignee or other party in	
Authorized Signature						Date Apri	12	3,2009		
Typed or printed name	Registration No. 34,702									
This collection of informa in application. Confidenti ubmitting the completed his form and/or suggestio Box 1450, Alexandria, Vi	tion is required by 37 C ality is governed by 35 application form to the ns for reducing this bur rginia 22313-1450. DO	FR 1.31 U.S.C. USPTO den, sh NOT S	1. The information 122 and 37 CFR ID. Time will vary ould be sent to the SEND FEES OR C	n is required to obtain 1.14. This collection is depending upon the in Chief Information Of OMPLETED FORMS	or re estin dividicer TO	tain a benefit by the mated to take 12 m dual case. Any cor	e publication	c which is to file (and to complete, including on the amount of tim	by the USPTO to process) g gathering, preparing, and ne you require to complete intment of Commerce, P.O. for Patents, P.O. Box 1450,	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.